

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF SOUTH CAROLINA

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Kelly

First name

Mae

Middle name

Hedman

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-0857

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

4. Your Employer Identification Number (EIN), if any.

About Debtor 1:

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

EIN _____

5. Where you live

**104 New Hope Dr.
Summerville, SC 29486**

Number, Street, City, State & ZIP Code

Berkeley

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

**Po Box 61652
North Charleston, SC 29419**

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years? No. Yes.

District _____ When _____ Case number _____
 District _____ When _____ Case number _____
 District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No Yes.

Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____

11. Do you rent your residence? No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Kelly Mae Hedman**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input type="checkbox"/> No. Go to line 16b.		
	<input checked="" type="checkbox"/> Yes. Go to line 17.		
16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.			
	<input type="checkbox"/> No. Go to line 16c.		
	<input type="checkbox"/> Yes. Go to line 17.		
16c.	State the type of debts you owe that are not consumer debts or business debts <hr/>		
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input checked="" type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
/s/ Kelly Mae Hedman	
Kelly Mae Hedman	Signature of Debtor 2
Signature of Debtor 1	
Executed on <u>January 11, 2024</u> MM / DD / YYYY	Executed on _____ MM / DD / YYYY

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Lauren Clark

Signature of Attorney for Debtor

Date

January 11, 2024

MM / DD / YYYY

Lauren Clark 10601

Printed name

Law Office of Lauren Clark

Firm name

**925 D Wappoo Rd
Charleston, SC 29407**

Number, Street, City, State & ZIP Code

Contact phone

803-386-8868

Email address

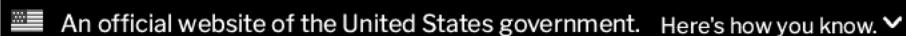
laurenclarklaw@aol.com

10601 SC

Bar number & State

i PACER Maintenance, 12/10/2023

Our systems will undergo maintenance on Sunday, December 10, 2023, from 5:00 a.m. to 4:00 p.m. ET. Access to certain portions of this site may be temporarily unavailable.

■ An official website of the United States government. Here's how you know. 

[Log in to PACER Systems](#) 



Party Search Results

Search Criteria: Party Search; Jurisdiction Type: [Bankruptcy]; SSN: [REDACTED]
[REDACTED]-0857]

Result Count: 3 (1 page)

Current Page: 1

Party Name	Case Number	Case Title
Johnston, Kelly (db)	1:1992bk14066	Dale Johnston and Kelly Johnston
Johnson, Kelly Mae (db)	2:2003bk07665	Kelly Mae Johnson
Johnston, Kelly Mae (db)	2:2003bk07665	Kelly Mae Johnson

PACER Service Center

12/07/2023 08:28:57

User laurenclarklaw

Client Code

Description All Court Type Search
All Courts; Search Jurisdiction [REDACTED] 0857; All Courts;
Jurisdiction [REDACTED]

Billable Pages 1 (\$0.10)

[PACER FAQ](#)

[Privacy & Security](#)

[Contact Us](#)



This site is maintained by the Administrative Office of the U.S. Courts on behalf of the Federal Judiciary.

PACER Service Center

[\(800\) 676-6856](tel:(800)676-6856)

pacer@psc.uscourts.gov

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		DISTRICT OF SOUTH CAROLINA	
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 0.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 0.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 76,424.50
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 76,424.50

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 47,331.00
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 47,331.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 8,195.00
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 8,195.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 91,550.00
		Your total liabilities \$ 147,076.00

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 9,134.00
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 9,134.00

5.	Schedule J: Your Expenses (Official Form 106J)	\$ 8,097.00
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 8,097.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?**

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Kelly Mae Hedman

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 10,458.33

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>8,195.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>8,195.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF SOUTH CAROLINA</u>			
Case number			<input type="checkbox"/> Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1	Make: <u>Ford</u>
Model: <u>Taurus</u>	
Year: <u>2019</u>	
Approximate mileage: <u>52,000</u>	
Other information:	
VIN: 1FAHP2D88KG110286	

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$13,000.00 \$13,000.00

3.2	Make: <u>Ford</u>
Model: <u>F-150</u>	
Year: <u>1995</u>	
Approximate mileage: <u>300,000</u>	
Other information:	
VIN: 1FTEF15N3SNA89602; Value \$689; debtor is joint owner with husband and has 1/2 interest	

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$689.00 \$344.50

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes4.1 Make: Triton

Who has an interest in the property? Check one

Model: Crappie Series C TX Debtor 1 onlyYear: 2019 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property
(see instructions)Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:*
*Creditors Who Have Claims Secured by Property.*Current value of the
entire property?\$23,150.00Current value of the
portion you own?\$11,575.00

Other information:

Triton boat 17ft (\$16,480) with 2018 Mercury ME75EL outboard motor (\$6670); Spouse makes all payments on this, and intends to continue making payments; apprx.

Debtor has 50% interest (total value of boat and motor \$23,150)

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for
pages you have attached for Part 2. Write that number here.....=>\$24,919.50

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....Appliances, furniture, misc houseware, etc.\$1,600.00

HHG used as collateral for Republic, may also be collateral for other finance company loans, apprx.

\$200.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

Personal electronics and electronic equipment (games/media players, etc), approx.

\$600.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

.9mm Taurus; apprx.

\$100.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Casual clothing

\$800.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Watches, rings, misc. costume jewelry, apprx.

\$800.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

2 dogs; GracieBleu & Summer

\$50.00

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,150.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Misc.
COH-EST

\$50.00

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

 No Yes.....

Institution name:

17.1.	Checking and Savings	Navy Federal Credit Union; (may not be exact balance on filing date, apprx.)	\$3.00
17.2.	Checking	First Citizens; (may not be exact balance on filing date, apprx.)	\$1,349.00
17.3.	Other financial account	Paypal; (may not be exact balance on filing date, apprx.)	\$0.00
17.4.	Other financial account	Venmo; (may not be exact balance on filing date, apprx.)	\$0.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

 No Yes.....

Institution or issuer name:

Unvested Tanger Outlet Employee Stock Options- As of the date of filing, employee stock options have not vested, and as such as of the date of filing debtor has 0 options of the 1000 options available to exercise. Options must first vest before debtor can exercise the option to purchase at \$5.73/share, and options would have to vest and be exercised before they expire on September 10, 2030. As debtor currently has no vested stock options, value \$0.

\$0.00**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.

Type of account:

Institution name:

Empower 401k; 401(k) , contributing, no loans outstanding, , apprx.

\$40,399.00**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.

Institution name or individual:

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No
 Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No
 Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No
 Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No
 Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No
 Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Debtor & Spouse owed federal taxes but received a state tax refund of \$2,354 for 2022. Anticipated 2023 tax refund, apprx.

State & Federal **\$2,354.00**

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No
 Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No
 Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Car Insurance
Health/Medical Insurance (payroll deducted)
Term-Life Insurance (payroll deducted)
Term-Life Insurance (Self-Pay)
Disability Insurance (payroll deducted)
Minnesota life hospital stay coverage (Self-pay)

No known claims outstanding.

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

FSA; apprx.

\$3,200.00

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$47,355.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 Kelly Mae Hedman Case number (if known) _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	\$0.00
56. Part 2: Total vehicles, line 5	\$24,919.50	
57. Part 3: Total personal and household items, line 15	\$4,150.00	
58. Part 4: Total financial assets, line 36	\$47,355.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
	+	
62. Total personal property. Add lines 56 through 61...	\$76,424.50	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$76,424.50

J.D. POWER

2019 Triton Boats Bass & Crappie Series 17 C TX() Values**



Values

	Suggested List Price	Low Retail	Average Retail
Base Price	\$19,495	\$14,410	\$16,480

Options (Add)

Total Price	\$19,495	\$14,410	\$16,480
--------------------	-----------------	-----------------	-----------------

Interested in Selling Your Vehicle?

Get a verified offer sent directly to you.

[Click Here](#)

 **Don't make a \$16,480 mistake,
get a Boat History Report before you buy!**

\$166 - \$1,211

Trade-in Value

\$689



ⓘ Important info
& definitions

Value valid as of **12/08/2023**

Factors That Impact Value

Check that yours are correct below.

Mileage: ZIP Code: 29407

Condition
Good

Edit Options

PRIVATE SELLER Exchange



Reach millions of buyers on Autotrader and KBB.com



Free vehicle history report



Secure transactions and financing



Verified buyers and sellers

Verified buyers get a clean title every time. Verified sellers get secure payment.

Autotrader

Kelley Blue Book

Sell My Car

Advertisement

CarMax has made you a no-obligation offer.

Compare your offer with the Edmunds Appraisal Report

Offer Details

Edmunds Appraisal



Your offer:

\$13,000*

Expires: 12/15/23

Offer Code: JE9B2C5L

Save this offer

Email

SEND

Print Offer Text Offer

[Edit Vehicle](#)

Vehicle Details:

2019 Ford Taurus

VIN: 1FAHP2D88KG110286 | Mileage: 52,000



Redeem Your Offer

Schedule an appointment and sell your car at any CarMax location.

Select a location:

CarMax Charleston, SC

712 Savage Road

Charleston, SC 29414

[\(888\) 720-0696](#) | [Directions](#)

22.64 miles away

CarMax Myrtle Beach, SC

82.8 miles away

CarMax Columbia, SC

87.01 miles away

Continue

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		DISTRICT OF SOUTH CAROLINA	
Case number (if known)			

Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt**1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.**

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
2019 Ford Taurus 52,000 miles VIN: 1FAHP2D88KG110286 Line from <i>Schedule A/B</i> : 3.1	\$13,000.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7) Unused Motor Vehicle exemption
1995 Ford F-150 300,000 miles VIN: 1FTEF15N3SNA89602; Value \$689; debtor is joint owner with husband and has 1/2 interest Line from <i>Schedule A/B</i> : 3.2	\$344.50	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(2)
2019 Triton Crappie Series C TX Triton boat 17ft (\$16,480) with 2018 Mercury ME75EL outboard motor (\$6670); Spouse makes all payments on this, and intends to continue making payments; apprx. Debtor has 50% interest (total value of boat and motor \$23,15 Line from <i>Schedule A/B</i> : 4.1	\$11,575.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7) Unused Motor Vehicle exemption

Debtor 1 **Kelly Mae Hedman**

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Appliances, furniture, misc houseware, etc. Line from Schedule A/B: 6.1	\$1,600.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
HHG used as collateral for Republic, may also be collateral for other finance company loans, apprx. Line from Schedule A/B: 6.2	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Personal electronics and electronic equipment (games/media players, etc), approx. Line from Schedule A/B: 7.1	\$600.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
.9mm Taurus; apprx. Line from Schedule A/B: 10.1	\$100.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(15)
Casual clothing Line from Schedule A/B: 11.1	\$800.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Watches, rings, misc. costume jewelry, apprx. Line from Schedule A/B: 12.1	\$800.00	<input checked="" type="checkbox"/> \$1,350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(4)
2 dogs; GracieBleu & Summer Line from Schedule A/B: 13.1	\$50.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Misc. COH-EST Line from Schedule A/B: 16.1	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5)
Checking and Savings: Navy Federal Credit Union; (may not be exact balance on filing date, apprx.) Line from Schedule A/B: 17.1	\$3.00	<input checked="" type="checkbox"/> \$3.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5)
Checking: First Citizens; (may not be exact balance on filing date, apprx.) Line from Schedule A/B: 17.2	\$1,349.00	<input checked="" type="checkbox"/> \$1,350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5)
Empower 401k; 401(k) , contributing, no loans outstanding, , apprx. Line from Schedule A/B: 21.1	\$40,399.00	<input type="checkbox"/> \$40,399.00 <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(14)

Debtor 1	Case number (if known)		
Kelly Mae Hedman			
Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Empower 401k; 401(k) , contributing, no loans outstanding, , apprx. Line from <i>Schedule A/B</i> : 21.1	\$40,399.00	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
State & Federal: Debtor & Spouse owed federal taxes but received a state tax refund of \$2,354 for 2022. Anticipated 2023 tax refund, apprx. Line from <i>Schedule A/B</i> : 28.1	\$2,354.00	<input checked="" type="checkbox"/> _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5)
FSA; apprx. Line from <i>Schedule A/B</i> : 35.1	\$3,200.00	<input checked="" type="checkbox"/> _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(5)
FSA; apprx. Line from <i>Schedule A/B</i> : 35.1	\$3,200.00	<input checked="" type="checkbox"/> _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7) Unused Motor Vehicle exemption

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman	
	First Name	Middle Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA	
Case number (if known)		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	---	--

2.1	Heritage Trust FCU/Rev FCU Creditor's Name	Describe the property that secures the claim: 2019 Triton Crappie Series C TX Triton boat 17ft (\$16,480) with 2018 Mercury ME75EL outboard motor (\$6670); Spouse makes all payments on this, and intends to continue making payments; apprx. Debtor has 50% interest (total value of boat)	\$21,574.00	\$23,150.00	\$0.00
-----	--	--	--------------------	--------------------	---------------

**Attn: Bankruptcy
Po Box 118000
Charleston, SC 29423**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Contingent
 Unliquidated
 Disputed
Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Purchase Money Security**

Date debt was incurred

Last 4 digits of account number

Debtor 1 **Kelly Mae Hedman**

First Name

Middle Name

Last Name

Case number (if known)

2.2 Navy FCU

Creditor's Name

**Attn: Bankruptcy
Po Box 3000
Merrifield, VA 22119**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**2019 Ford Taurus 52,000 miles
VIN: 1FAHP2D88KG110286**

\$12,748.00

\$13,000.00

\$0.00

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Purchase Money Security**

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

2.3 Republic Finance

Creditor's Name

**Attn: Bankruptcy
7031 Commerce Circle
Baton Rouge, LA 70809**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**HHG used as collateral for
Republic, may also be collateral for
other finance company loans,
apprx.**

\$13,009.00

\$200.00

\$12,809.00

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Non-Purchase Money Security**

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$47,331.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$47,331.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[] Name, Number, Street, City, State & Zip Code **HERITAGE TRUST FCU**
200 MARYMEADE DR
POB 2941101
Summerville, SC 29483 On which line in Part 1 did you enter the creditor? **2.1**
Last 4 digits of account number _____

[] Name, Number, Street, City, State & Zip Code **Navy FCU**
PO Box 3000
Merrifield, VA 22119-3000 On which line in Part 1 did you enter the creditor? **2.2**
Last 4 digits of account number _____

Debtor 1 **Kelly Mae Hedman**

First Name

Middle Name

Last Name

Case number (if known) _____

[] Name, Number, Street, City, State & Zip Code
Republic Finance Corp
7031 Commerce Cir
Baton Rouge, LA 70809

On which line in Part 1 did you enter the creditor? **2.3**

Last 4 digits of account number _____

[] Name, Number, Street, City, State & Zip Code
Rev FCU
200 Marymeade Dr
Summerville, SC 29483-5243

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman	
	First Name	Middle Name
Debtor 2		
(Spouse if, filing)	First Name	Middle Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA	
Case number (if known)		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	\$8,195.00
	PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2021 & 2022 Federal Taxes
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	2021 Taxes - 2,973 2022 Taxes - 5,222	

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 **Kelly Mae Hedman**

4.1	Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Number Street City State Zip Code	Last 4 digits of account number _____ \$974.00 When was the debt incurred? _____
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input type="checkbox"/> Yes		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
4.2		
Chase Card Services Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850 Number Street City State Zip Code		
Last 4 digits of account number _____ \$1,476.00 When was the debt incurred? _____		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input type="checkbox"/> Yes		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
4.3		
Citizens One Nonpriority Creditor's Name Attn: Bankruptcy One Citizens Plaza Providence, RI 02903 Number Street City State Zip Code		
Last 4 digits of account number _____ \$203.00 When was the debt incurred? _____		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Check Credit Or Line Of Credit <input type="checkbox"/> Yes		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		

Debtor 1 Kelly Mae Hedman

4.4

Comenity/Carter

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 182125****Columbus, OH 43218**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$251.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account

4.5

Continental Finance Co

Nonpriority Creditor's Name

Attn: Bankruptcy**4550 Linden Hill Rd, Ste 4****Wilmington, DE 19808**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$981.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.6

Credit One Bank

Nonpriority Creditor's Name

Attn: Bankruptcy Department**6801 Cimarron Rd****Las Vegas, NV 89113**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$1,222.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

Debtor 1 Kelly Mae Hedman

4.7

Credit One Bank

Nonpriority Creditor's Name

Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$990.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Credit Card**

4.8

Discover Financial

Nonpriority Creditor's Name

Attn: Bankruptcy
Po Box 3025
New Albany, OH 43054

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$9,136.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Credit Card**

4.9

Genesis FS Card Services

Nonpriority Creditor's Name

Attn: Bankruptcy
Po Box 4477
Beaverton, OR 97076

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$440.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Credit Card**

Debtor 1 Kelly Mae Hedman4.1
0**Genesis FS Card Services**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 4477****Beaverton, OR 97076**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$265.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card4.1
1**Goldman Sachs Bank USA**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 70379****Philadelphia, PA 19176**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$1,277.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card4.1
2**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$9,778.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Unsecured

Debtor 1 Kelly Mae Hedman4.1
3**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$4,519.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify **Unsecured**

4.1
4**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$3,990.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify **Unsecured**

4.1
5**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$3,156.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify **Credit Card**

Debtor 1 Kelly Mae Hedman4.1
6**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$2,934.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Unsecured**

4.1
7**Navy FCU**

Nonpriority Creditor's Name

Attn: Bankruptcy**Po Box 3000****Merrifield, VA 22119**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$2,874.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.1
8**NetCredit**

Nonpriority Creditor's Name

Attn: Bankruptcy**175 W. Jackson Blvd, Ste 1000****Chicago, IL 60604**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$3,450.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Unsecured**

Debtor 1 Kelly Mae Hedman4.1
9**Notice Only Recipients**

Nonpriority Creditor's Name

Last 4 digits of account number

\$0.00

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Credit Bureaus, Tax Agencies, and other Notice Only Recipients4.2
0**One Main Financial**

Nonpriority Creditor's Name

**Po Box 1010
Evansville, IN 47706**

Last 4 digits of account number

\$3,297.00

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Unsecured4.2
1**Syncb/Old Navy**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Last 4 digits of account number

\$410.00

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Account

Debtor 1 Kelly Mae Hedman4.2
2**Syncb/Venmo**

Nonpriority Creditor's Name

**Attn: Bankruptcy
P.O. Box 965064
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$3,559.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

4.2
3**Synchrony Bank / Paypal**

Nonpriority Creditor's Name

**140 Wekiva Springs Road
Longwood, FL 32779**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$786.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Charge Account

4.2
4**Synchrony Bank/Amazon**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$5,155.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Charge Account

Debtor 1 Kelly Mae Hedman4.2
5**Synchrony Bank/Care Credit**

Nonpriority Creditor's Name

Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$2,121.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account4.2
6**Synchrony Bank/Care Credit**

Nonpriority Creditor's Name

Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$944.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account4.2
7**Synchrony Bank/Gap**

Nonpriority Creditor's Name

Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$778.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

Debtor 1 Kelly Mae Hedman4.2
8**Synchrony Bank/JCPenney**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$281.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account4.2
9**Synchrony Bank/Lowes**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$2,512.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account4.3
0**Synchrony Bank/Sams**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

\$1,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Charge Account

Debtor 1 Kelly Mae Hedman4.3
1**Synchrony/Car Care**

Nonpriority Creditor's Name

**Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$3,953.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Charge Account

4.3
2**Target NB**

Nonpriority Creditor's Name

**C/O Financial & Retail Services
Mailstop BT PO Box 9475
Minneapolis, MN 55440**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$694.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card

4.3
3**Trac/CBCD/Citicorp**

Nonpriority Creditor's Name

**Citicorp Cr Svrs/Centralized
Bankruptcy
Po Box 790040
St Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$1,699.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Charge Account

Debtor 1 Kelly Mae Hedman4.3
4**Upgrade, Inc.**

Nonpriority Creditor's Name

Attn: Bankruptcy**275 Battery Street 23rd Floor
San Francisco, CA 94111**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$9,628.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Unsecured**

4.3
5**USAA Federal Savings Bank**

Nonpriority Creditor's Name

Attn: Bankruptcy**9800 Fredericksburg Road
San Antonio, TX 78288**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$6,817.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Unsecured**

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Amazon Corp
410 Terry Ave N
Seattle, WA 98109**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**AMEX
World Financial Center
200 Vesey Street
New York, NY 10285**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Attorney General of the United States
950 Pennsylvania Ave NW
Washington, DC 20530-0009**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **Kelly Mae Hedman**

Case number (if known) _____

Name and Address

Car Care
1851 Craig Park Ct
Saint Louis, MO 63146-4122

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Care Credit
PO Box 981438
El Paso, TX 79998-1438

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

CareCredit
Po Box 960061
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Chase Card Services
1111 Polaris Parkway
Columbus, OH 43240

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Citicorp
388 Greenwich St
New York, NY 10013-2362

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Citizens One Financing
1 Citizens Plz q
Providence, RI 02903

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Community Bank
PO Box 183003
Columbus, OH 43218-3003

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Continental Finance Company
4550 Linden Hill Rd Ste 400
Wilmington, DE 19808-2952

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Credit One Bank
6801 S Cimarron Rd
Las Vegas, NV 89113

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

CREDIT ONE BANK
PO BOX 98872
Las Vegas, NV 89193-8872

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Discover Financial
P.O. Box 6103
Carol Stream, IL 60197-6103

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Equifax Information Services LLC
P.O. Box 740256
Atlanta, GA 30374

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Kelly Mae Hedman

Last 4 digits of account number

Name and Address

Experian
PO Box 4500
Allen, TX 75013

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Gap
2 Folsom St
San Francisco, CA 94105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Genesis FS Card Services
PO BOX 205458
Dallas, TX 75320

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Genesis FS Card Services
PO BOX 205458
Dallas, TX 75320

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Goldman Sachs Bank USA
200 West Street
New York, NY 10282-2102

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

JC Penny
Po Box 71719
Philadelphia, PA 19176

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Lowes
1000 Lowe's Boulevard
Mooresville, NC 28117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.29 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Navy FCU
PO Box 3000
Merrifield, VA 22119-3000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Navy FCU
PO Box 3000
Merrifield, VA 22119-3000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Navy FCU
PO Box 3000
Merrifield, VA 22119-3000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Navy FCU

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Kelly Mae Hedman****PO Box 3000**
Merrifield, VA 22119-3000 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Navy FCU
PO Box 3000
Merrifield, VA 22119-3000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Navy FCU
PO Box 3000
Merrifield, VA 22119-3000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
NetCredit
175 W. Jackson Blvd., Suite 1000
Chicago, IL 60604

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.18** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Old Navy
2 Folsom St
San Francisco, CA 94105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
OneMain
5221 Geary Blvd
San Francisco, CA 94118-2817

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
PayPal Credit
P.O. Box 105658
Atlanta, GA 30348-5658

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Sams Club
2101 SE Simple Savings Dr
Bentonville, AR 72716-0745

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
SC Dept. of Revenue
PO Box 125
Columbia, SC 29214

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.29** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **Kelly Mae Hedman**

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank
950 Forrer Blvd
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Synchrony Bank**950 Forrer Blvd**
Dayton, OH 45420-1469

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Target Red Card
POB 30171
Tampa, FL 33630

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

TransUnion
Consumer Dispute Center
PO Box 2000
Crum Lynne, PA 19022

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

United States Attorney Office
Attn: Doug Barnett
1441 Main St
Columbia, SC 29201

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Upgrade, Inc.

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

**275 Battery St Fl 23
San Francisco, CA 94111-3305**

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Name and Address
USAA Federal Savings Bank
10750 McDermott Fry
San Antonio, TX 78288**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.35 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Name and Address
Venmo
2211 N 1st St
San Jose, CA 95131-2021**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>8,195.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ <u>8,195.00</u>
Total claims from Part 2	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <u>91,550.00</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <u>91,550.00</u>

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			State what the contract or lease is for
2.1	<hr/> <hr/> <hr/>		
	Name		
	Number	Street	
	City	State	ZIP Code
2.2	<hr/> <hr/> <hr/>		
	Name		
	Number	Street	
	City	State	ZIP Code
2.3	<hr/> <hr/> <hr/>		
	Name		
	Number	Street	
	City	State	ZIP Code
2.4	<hr/> <hr/> <hr/>		
	Name		
	Number	Street	
	City	State	ZIP Code
2.5	<hr/> <hr/> <hr/>		
	Name		
	Number	Street	
	City	State	ZIP Code

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **Jardin Hedman**
104 New Hope Dr.
Summerville, SC 29486

Schedule D, line _____
 Schedule E/F, line 2.1
 Schedule G _____
Internal Revenue Service

3.2 **Jardin Hedman**
104 New Hope Dr.
Summerville, SC 29486

Schedule D, line 2.1
 Schedule E/F, line _____
 Schedule G _____
Heritage Trust FCU/Rev FCU

3.3 **Jardin Hedman**
104 New Hope Dr.
Summerville, SC 29486

Schedule D, line _____
 Schedule E/F, line 4.13
 Schedule G _____
Navy FCU

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA
Case number (if known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

	Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Include part-time, seasonal, or self-employed work.	Field Manager	Paramedic
Occupation may include student or homemaker, if it applies.	Tanger Management LLC	Berkeley Co. Goverment
	3200 Northline Ave. Suite 360 Greensboro, NC 27408	1003 US-52 Moncks Corner, SC 29461

How long employed there?

May 2009 - Current

1994 - Current

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 7,518.00	\$ 7,630.00
3. Estimate and list monthly overtime pay.	3. +\$ 0.00	+\$ 0.00
4. Calculate gross Income. Add line 2 + line 3.	4. \$ 7,518.00	\$ 7,630.00

Debtor 1 Kelly Mae Hedman

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 7,518.00	\$ 7,630.00

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,394.00	\$ 2,120.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 677.00
5c. Voluntary contributions for retirement plans	5c. \$ 752.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 379.00	\$ 692.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ 0.00

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

10. Calculate monthly income. Add line 7 + line 9.
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10.

\$ 4,993.00	+ \$ 4,141.00	= \$ 9,134.00
-------------	---------------	---------------

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.
Specify:

11.

+\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12.

\$ 9,134.00

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Debtor has worked for Tanger for 14 years, and has only received 1 performance bonus during that time (in March 2023 for the 2022 calendar year); as of December 2023, Debtor had not met stretch goals, so she does not anticipate a bonus. It is possible that the company could override the requirements and give a smaller bonus, however, this is not anticipated. No expected changes of more than 10%.

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2. Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Spouse

57

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know
the value of such assistance and have included it on Schedule I: Your Income
(Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **0.00**

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	0.00
4b. \$	240.00
4c. \$	100.00
4d. \$	0.00
5. \$	0.00

Debtor 1 <u>Kelly Mae Hedman</u>	Case number (if known)
<p>6. Utilities:</p> <p>6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: _____</p> <p>6a. \$ <u>265.00</u> 6b. \$ <u>25.00</u> 6c. \$ <u>460.00</u> 6d. \$ <u>0.00</u></p> <p>7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: <u>Minnesota life hospital stay coverage, apprx.</u></p> <p>15a. \$ <u>404.00</u> 15b. \$ <u>0.00</u> 15c. \$ <u>464.00</u> 15d. \$ <u>36.00</u></p> <p>16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>H Mobile Home Taxes, apprx.</u> Specify: <u>H motorcycle taxes, apprx.</u> Specify: <u>JT 2008 Ford F150 Taxes, apprx.</u> Specify: <u>H 1996 Ford Crown Victoria taxes, apprx.</u> Specify: <u>H 2008 Chevy Tahoe, apprx</u> Specify: <u>W 2019 Ford Taurus, apprx.</u> Specify: <u>W Boat taxes, husband pays, apprx.</u> Specify: <u>W boat motor taxes (husband pays), apprx.</u></p> <p>16. \$ <u>33.00</u> \$ <u>1.00</u> \$ <u>5.00</u> \$ <u>1.00</u> \$ <u>1.00</u> \$ <u>15.00</u> \$ <u>20.00</u> \$ <u>16.00</u></p> <p>17. Installment or lease payments:</p> <p>17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: _____ 17d. Other. Specify: _____</p> <p>17a. \$ <u>0.00</u> 17b. \$ <u>0.00</u> 17c. \$ <u>0.00</u> 17d. \$ <u>0.00</u></p> <p>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: _____</p> <p>18. \$ <u>0.00</u> \$ <u>0.00</u></p> <p>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</p> <p>20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues</p> <p>20a. \$ <u>0.00</u> 20b. \$ <u>0.00</u> 20c. \$ <u>0.00</u> 20d. \$ <u>0.00</u> 20e. \$ <u>0.00</u></p> <p>21. Other: Specify: <u>Spouse (Makes Boat Payment)</u> Spouse Credit Card & Loan Payments</p> <p>21. +\$ <u>283.00</u> +\$ <u>3,628.00</u></p> <p>22. Calculate your monthly expenses</p> <p>22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.</p> <p>\$ <u>8,097.00</u> \$ <u>8,097.00</u></p> <p>23. Calculate your monthly net income.</p> <p>23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above.</p> <p>23a. \$ <u>9,134.00</u> 23b. -\$ <u>8,097.00</u></p> <p>23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i>.</p> <p>23c. \$ <u>1,037.00</u></p>	

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: **Debtor and her spouse live in a mobile home owned by husband and located on land owned by inlaws.**

No expected changes of more than 10%.

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

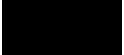
Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Kelly Mae Hedman

Kelly Mae Hedman

Signature of Debtor 1

Date January 11, 2024

X

Signature of Debtor 2

Date

Fill in this information to identify your case:

Debtor 1	Kelly Mae Hedman		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF SOUTH CAROLINA		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

Debtor 1	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$3,470.00		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2023)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$112,519.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, 2022)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$169,358.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2023)	401(k) withdraw, apprx.	\$11,930.00		
For the calendar year before that: (January 1 to December 31, 2022)	Withdraw from 401k	\$7,740.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

Debtor 1 Kelly Mae Hedman

Case number (if known)

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Navy FCU Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	Last 3 months, regular payments, apprx.	\$762.00	\$12,748.00	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Republic Finance Attn: Bankruptcy 7031 Commerce Circle Baton Rouge, LA 70809	2 months, regular payments, apprx.	\$970.00	\$13,009.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Heritage Trust FCU/Rev FCU Attn: Bankruptcy Po Box 118000 Charleston, SC 29423	Last 3 months, regular payments, apprx.	\$846.00	\$21,574.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Boat</u>
Navy FCU Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	Last 3 months, regular payments, apprx.	\$882.00	\$9,778.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input checked="" type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Upgrade, Inc. Attn: Bankruptcy 275 Battery Street 23rd Floor San Francisco, CA 94111	2 months, regular payments, apprx.	\$842.00	\$9,628.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other _____
Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	2 months, regular payments, apprx.	\$726.00	\$9,136.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
USAA Federal Savings Bank Attn: Bankruptcy 9800 Fredericksburg Road San Antonio, TX 78288	2 months, regular payments, apprx.	\$982.00	\$6,817.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	Over last year	\$1,200.00	\$8,195.00	Debtor and NFS have been making payments towards joint debt over the last year, payments apprx.
Heritage Trust FCU/Rev FCU Attn: Bankruptcy Po Box 118000 Charleston, SC 29423	Over last year	\$3,384.00	\$21,574.00	Debtor and NFS have been making payments towards joint debt over the last year, combined payments apprx.
Navy FCU Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	Over last year	\$1,056.00	\$4,519.00	Debtor and NFS have been making payments towards joint debt over the last year, combined payments apprx.
Navy FCU Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	Over last year	\$936.00	\$3,990.00	Debtor and NFS have been making payments towards joint debt over the last year, combined payments apprx.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
---------------------------	--------------------	-----------------	--------------------

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
---------------------------	--	------	-----------------------

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
--	-------------------------------	-----------------------	-------

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
--	---	-------------------	------------------------

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
The Law Office of Lauren Clark 925 D Wappo Rd. Charleston, SC 29407	\$1,000 Attorney Fees, plus costs	Through January 2024	\$1,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
--------------------------------	---	-----------------------------------	-------------------

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	--	-----------------------	-----------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name

Address (Number, Street, City, State and ZIP Code)

Where is the property?

(Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site

Address (Number, Street, City, State and ZIP Code)

Governmental unit

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site

Address (Number, Street, City, State and ZIP Code)

Governmental unit

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title

Case Number

Court or agency

Name

Address (Number, Street, City, State and ZIP Code)

Nature of the case

Status of the case

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1 Kelly Mae Hedman

Case number (if known) _____

 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
--	---	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

 No Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kelly Mae Hedman

Kelly Mae Hedman
Signature of Debtor 1

Signature of Debtor 2Date January 11, 2024

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 Kelly Mae Hedman

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of South Carolina

Case number
(if known) _____

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>6,940.00</u>	\$ <u>6,656.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>

Debtor 1

Kelly Mae Hedman

Case number (if known)

7. Interest, dividends, and royalties

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
For your spouse \$ **0.00**

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ **765.33** \$ **0.00**

10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ **0.00** \$ **0.00**
\$ **0.00** \$ **0.00**
+ \$ **0.00** \$ **0.00**

Total amounts from separate pages, if any.

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 7,705.33	+ \$ 6,656.00	= \$ 14,361.33
--------------------	----------------------	-----------------------

Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ **14,361.33**

13. Calculate the marital adjustment. Check one:

You are not married. Fill in 0 below.
 You are married and your spouse is filing with you. Fill in 0 below.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

Debt payments	\$ 3,493.00
Woodmen Life Insurance	\$ 83.00
TruStage Life Insurance	\$ 45.00
Boat payment	+ \$ 282.00
Total	\$ 3,903.00
Copy here=> - 3,903.00	

14. Your current monthly income. Subtract line 13 from line 12.

\$ **10,458.33**

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> \$ **10,458.33**

Debtor 1

Kelly Mae Hedman

Case number (if known)

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form.

\$ 125,499.96

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

SC

16b. Fill in the number of people in your household.

2

16c. Fill in the median family income for your state and size of household.

\$ 71,914.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. **Copy your total average monthly income from line 11.** **\$ 14,361.33**

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

-\$ 0.00

19b. **Subtract line 19a from line 18.**

\$ 14,361.33

20. **Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b **\$ 14,361.33**

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ 172,335.96

20c. Copy the median family income for your state and size of household from line 16c

\$ 71,914.00

21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Kelly Mae Hedman

Kelly Mae Hedman

Signature of Debtor 1

Date **January 11, 2024**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Fill in this information to identify your case:

Debtor 1 Kelly Mae Hedman

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of South Carolina

Case number
(if known) _____

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/22

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ 1,389.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person	\$ <u>79</u>	
7b. Number of people who are under 65	X <u>2</u>	
7c. Subtotal. Multiply line 7a by line 7b.	\$ <u>158.00</u>	Copy here=> \$ <u>158.00</u>

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person	\$ <u>154</u>	
7e. Number of people who are 65 or older	X <u>0</u>	
7f. Subtotal. Multiply line 7d by line 7e.	\$ <u>0.00</u>	Copy here=> \$ <u>0.00</u>

7g. **Total.** Add line 7c and line 7f \$ 158.00 Copy total here=> \$ 158.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

■ **Housing and utilities - Insurance and operating expenses**

■ **Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 685.00

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 1,276.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor

Average monthly payment

-NONE-

\$ _____

9b. Total average monthly payment

\$ 0.00

Copy here=> -\$ 0.00 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$ 1,276.00 Copy here=> \$ 1,276.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ 0.00

Explain why: _____

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

0. Go to line 14.

1. Go to line 12.

2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ 484.00

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 Describe Vehicle 1: 2019 Ford Taurus 52,000 miles VIN: 1FAHP2D88KG110286

13a. Ownership or leasing costs using IRS Local Standard..... \$ 629.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment	
<u>Navy FCU</u>	\$ <u>261.89</u>	
Total Average Monthly Payment	\$ <u>261.89</u>	<small>Copy here => -\$ <u>261.89</u> Repeat this amount on line 33b.</small>
13c. Net Vehicle 1 ownership or lease expense	\$ <u>367.11</u>	<small>Copy net Vehicle 1 expense here => \$ <u>367.11</u></small>
Subtract line 13b from line 13a. if this number is less than \$0, enter \$0.		

Vehicle 2 Describe Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard..... \$ 0.00

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment	
<u>-NONE-</u>	\$ <u>0.00</u>	
Total average monthly payment	\$ <u>0.00</u>	<small>Copy here => -\$ <u>0.00</u> Repeat this amount on line 33c.</small>
13f. Net Vehicle 2 ownership or lease expense	\$ <u>0.00</u>	<small>Copy net Vehicle 2 expense here => \$ <u>0.00</u></small>
Subtract line 13e from line 13d. if this number is less than \$0, enter \$0.		

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation expense allowance* regardless of whether you use public transportation. \$ 0.00

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. \$ 0.00

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Other Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.
16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$ <u>3,514.00</u>
17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$ <u>677.00</u>
18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$ <u>265.00</u>
19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$ <u>0.00</u>
20. Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services.	\$ <u>0.00</u>
21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$ <u>0.00</u>
22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.	\$ <u>77.00</u>
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$ <u>0.00</u>
24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$ <u>8,892.11</u>
Additional Expense Deductions	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	
Health insurance	\$ <u>574.00</u>
Disability insurance	\$ <u>212.00</u>
Health savings account	+\$ <u>271.00</u>
Total	\$ <u>1,057.00</u>
	Copy total here=> _____
	\$ <u>1,057.00</u>
Do you actually spend this total amount?	
<input type="checkbox"/> No. How much do you actually spend?	\$ _____
<input checked="" type="checkbox"/> Yes	\$ _____
26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b)	\$ <u>0.00</u>
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.	\$ <u>0.00</u>

Debtor 1

Kelly Mae Hedman

Case number (if known)

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.		
If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs		
You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.		\$ 0.00
29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$189.58* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.		
You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.		
* Subject to adjustment on 4/01/25, and every 3 years after that for cases begun on or after the date of adjustment.		\$ 0.00
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.		
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.		
You must show that the additional amount claimed is reasonable and necessary.		\$ 46.00
31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).		
Do not include any amount more than 15% of your gross monthly income.		\$ 0.00
32. Add all of the additional expense deductions.	\$ 1,103.00	
Add lines 25 through 31.		

Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home		Average monthly payment
33a. Copy line 9b here	=> \$ 0.00
Loans on your first two vehicles		
33b. Copy line 13b here	=> \$ 261.89
33c. Copy line 13e here	=> \$ 0.00
33d. List other secured debts:		

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?
-NONE-		<input type="checkbox"/> No
		<input type="checkbox"/> Yes \$ _____
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes \$ _____
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes + \$ _____
33e Total average monthly payment. Add lines 33a through 33d	\$ 261.89	Copy total here=> \$ 261.89

Debtor 1

Kelly Mae Hedman

Case number (if known)

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.
 Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
-NONE-		\$ _____	÷ 60 = \$ _____
		Total \$ 0.00	Copy total here=> \$ 0.00

35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.
 Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ **8,195.00** ÷ 60 \$ **136.58**

36. Projected monthly Chapter 13 plan payment

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense

\$ _____
X _____

Copy total here=> \$ _____

37. Add all of the deductions for debt payment. Add lines 33e through 36.

\$ **398.47**

Total Deductions from Income

38. Add all of the allowed deductions.

Copy line 24, *All of the expenses allowed under IRS expense allowances* \$ **8,892.11**

Copy line 32, *All of the additional expense deductions* \$ **1,103.00**

Copy line 37, *All of the deductions for debt payment* +\$ **398.47**

Total deductions \$ **10,393.58** Copy total here=> \$ **10,393.58**

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.** \$ **10,458.33**

40. **Fill in any reasonably necessary income you receive for support for dependent children.** The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ **0.00**

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ **752.00**

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here => \$ **10,393.58**

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances **Amount of expense**

In re Lanning; early retirement withdraws for attorney fees, medical expenses; not expected to continue over 60 months \$ **765.00**

..... \$ _____
..... \$ _____

Total \$ **765.00** Copy here=> \$ **765.00**

44. **Total adjustments.** Add lines 40 through 43. => \$ **11,910.58** Copy here=> -\$ **11,910.58**

45. **Calculate your monthly disposable income under § 1325(b)(2).** Subtract line 44 from line 39.

\$ **-1,452.25**

Part 3: Change in Income or Expenses

46. **Change in income or expenses.** If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ _____

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Kelly Mae Hedman

Kelly Mae Hedman

Signature of Debtor 1

Date **January 11, 2024**

MM / DD / YYYY

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **07/01/2023 to 12/31/2023**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Tanger**

Income by Month:

6 Months Ago:	<u>07/2023</u>	<u>\$6,940.00</u>
5 Months Ago:	<u>08/2023</u>	<u>\$6,940.00</u>
4 Months Ago:	<u>09/2023</u>	<u>\$6,940.00</u>
3 Months Ago:	<u>10/2023</u>	<u>\$6,940.00</u>
2 Months Ago:	<u>11/2023</u>	<u>\$6,940.00</u>
Last Month:	<u>12/2023</u>	<u>\$6,940.00</u>
	Average per month:	<u>\$6,940.00</u>

Line 9 - Pension and retirement income

Source of Income: **Retirement withdraw**

Income by Month:

6 Months Ago:	<u>07/2023</u>	<u>\$0.00</u>
5 Months Ago:	<u>08/2023</u>	<u>\$2,623.00</u>
4 Months Ago:	<u>09/2023</u>	<u>\$0.00</u>
3 Months Ago:	<u>10/2023</u>	<u>\$1,969.00</u>
2 Months Ago:	<u>11/2023</u>	<u>\$0.00</u>
Last Month:	<u>12/2023</u>	<u>\$0.00</u>
	Average per month:	<u>\$765.33</u>

Debtor 1

Kelly Mae Hedman

Case number (if known) _____

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **07/01/2023 to 12/31/2023**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Spouse employment**

Income by Month:

6 Months Ago:	<u>07/2023</u>	<u>\$5,707.00</u>
5 Months Ago:	<u>08/2023</u>	<u>\$7,260.00</u>
4 Months Ago:	<u>09/2023</u>	<u>\$6,349.00</u>
3 Months Ago:	<u>10/2023</u>	<u>\$6,231.00</u>
2 Months Ago:	<u>11/2023</u>	<u>\$7,248.00</u>
Last Month:	<u>12/2023</u>	<u>\$7,141.00</u>
Average per month:		<u>\$6,656.00</u>

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245 filing fee

\$78 administrative fee

+ \$15 trustee surcharge

\$338 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$571	administrative fee
\$1,738 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	<u>administrative fee</u>
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	<u>administrative fee</u>
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

<http://www.uscourts.gov/forms/bankruptcy-forms>

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court
District of South Carolina**

In re **Kelly Mae Hedman**

Debtor(s)

Case No.

Chapter

13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 4,300.00
Prior to the filing of this statement I have received	\$ 1,000.00
Balance Due	\$ 3,300.00

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 11, 2024

Date

/s/ Lauren Clark

Lauren Clark 10601

Signature of Attorney

Law Office of Lauren Clark

925 D Wappoo Rd

Charleston, SC 29407

803-386-8868 Fax: 866-390-0669

laurenclarklaw@aol.com

Name of law firm

SIX: For the above-stated fees, Attorney agrees to consult with Client in order to analyze case, prepare and file petition for relief and schedules if appropriate, prosecute any lien avoid or value motions (ch. 13 only), attend the first meeting of creditors and confirmation hearings (if necessary), and consult with Client for one follow up advisory conference.

All representation ends upon the earlier of: withdrawal by Attorney due to non-payment or non-cooperation by client, futility, or discharge/dismissal of bankruptcy case.

SEVEN: The fee will NOT include any representation other than listed above, including, but not limited to, credit-bureau reporting issues, revisions to schedules due to outdated or incorrect information provided by client, amendments, Rule 2004 hearings, motions to modify the automatic stay, any objections, motions to dismiss or convert, adversary proceedings, modification of plan, release of property motion, moratorium, audits, trials or appeals.

Fees for these additional services not included in the basic fee require an additional retainer to be paid and will be billed to Client at \$250.00 per hour for all time spent in negotiation or pursuing the objectives of Client, and for all other time (such as conferences, telephone calls, preparing legal papers and letters, gathering or reviewing evidence, legal research, etc.) and \$300.00 per hour for all court hearings.

If additional services are necessary, Client agrees to pay Attorney a retainer in the amount determined by Attorney, and Client has no expectation of Attorney representation in these additional matters until Client has paid an additional retainer.

Client understands that additional work for problems or matters that arise after filing may require an appointment. Any additional work as well as fees will be discussed then.

Client agrees that in Chapter 13 cases, Attorney may file supplemental fee applications for work performed and services rendered beyond the basic retainer, so that the fee is added to Client's Chapter 13 plan. Client understands that in some circumstances, this may result in an increase in Chapter 13 plan payments. Attorney will notify client if a supplemental fee application will increase Client's Chapter 13 plan payment.

Extraordinary expenses such as long distance, copies (including making copies of client's file to give to client), mileage, facsimile and postage charges may be added to Client's bill at Attorney's discretion.

Client agrees to file retrieval costs.

Attorney shall be entitled to all fees earned and costs incurred to date notwithstanding said discharge by Client.

Page | 5

I have read and understand this paragraph of the agreement.

Initial Below:

Keisha

I have read and understand this paragraph of the agreement.

Initial Below:

Keisha

I have read and understand this paragraph of the agreement.

I have read and understand this paragraph of the agreement.

Initial Below:

Keisha

EIGHT: If any portion of attorney's fees and costs are not paid directly or in full within the Client's Chapter 13 plan, Client agrees to remit any remaining unpaid balance within thirty (30) days without regard to whether a statement has been sent. Balances not paid within 30 days shall incur a late charge of 1 1/4 % per month on the balance owed and case may be subject to termination.

Client agrees to pay all outstanding fees and/or costs before Attorney releases file to Client, should Client desire to retrieve file.

In event of dismissal from Chapter 13, all remaining attorney fees are immediately payable and fully earned. If a Chapter 13 case is converted to Chapter 7, any remaining fees will survive discharge. Any money held by trustee is payable to attorney for services.

Payment of all costs and fees shall be made before Attorney releases file.

NINE: Client understands that this agreement is based upon assumption that Client has fully disclosed all relevant information and has not omitted or concealed any material fact.

Client understands that Attorney cannot fully advise Client without full knowledge of Client's situation.

Client agrees that Attorney shall not be responsible for any repossessions and/or foreclosures which occur before or after the filing of the case.

Client understands that any deliberate and/or grossly negligent failure to disclose relevant information or concealment may constitute grounds for Attorney to withdraw from representing Client, and furthermore, may subject Client to civil and/or criminal sanctions.

Attorney may in his/her absolute discretion or allowable under the Rules of Professional Conduct withdraw from representing Client at any time upon written notice.

Client may discharge Attorney at any time by written notice.

Attorney's proposals regarding tax debt discharge are based on information provided by Client. Fees charged for the basic case do not include tax discharge analysis. Client waives any liability of Attorney in representations regarding tax dischargeability.

TEN: Client shall immediately notify Attorney of any change of address, telephone number, or change in employment throughout the representation, and shall attend all required hearings.

I have read and understand this paragraph of the agreement.

Initial Below:

Keisha

Page | 6

SUPPLEMENTAL FEE SCHEDULE

The following are normal fees for extra services that may arise during a bankruptcy. These services are NOT normally required in the typical case, and will require extra fees because of the extra work required. Additionally, special circumstances may make it necessary to charge even a higher fee than listed below because of extra work that may be required. These fees could be adjusted by the Bankruptcy Court. All administrative costs (filing fees, postage, copies, mileage, long distance telephone charges, etc.) will be added to the fees below.

NOTE: IT IS REQUESTED THAT THESE FEES ARE PAYABLE IN ADVANCE OF THE SERVICES RENDERED.

Description	Amount
Rescheduling of Creditor's Meeting due to client's failure to attend	\$300.00
Adding a creditor after Petition has been filed (+court fee)	\$250.00
Filing a motion for a payment moratorium (add \$150 if hearing required)	\$500.00
Filing a motion to sell property (add \$150 if hearing required)	\$500.00
Filing a motion to incur secured debt (add \$150 if hearing required)	\$500.00
Filing a motion to abandon property (add \$150 if hearing required)	\$500.00
Filing a modified plan and/or budget due to lifting of the stay, sale/surrender of an asset or to reduce payments because clients circumstances have changed or due to omitted or incorrect information provided by client.	\$500.00
Objecting to proof of claim (add \$150 if hearing required)	\$500.00
Defending any motion to dismiss by Trustee (add \$150 if hearing)	\$500.00
Defending any motion to Dismiss by any Creditor (add \$150 if hearing)	\$500.00
Filing a motion to reconsider after Order of Dismissal	\$500.00
Attending a "3"4" Debtor's Examination	\$900.00
Attending any contested Court Hearing other than Confirmation	\$500.00
Defending a motion to lift the Stay (bankruptcy protection) due to failure to make payments outside the plan or failing to keep insurance on home or car (add \$150.00 if hearing required)	\$600.00
Filing a motion to modify Stay	\$500.00
Filing a motion to avoid a judicial lien (ch. 8)	\$500.00
Filing a motion to reconsider after Default on I93 Consent Order	\$500.00
Filing a motion to divide a joint case	\$500.00
Filing a motion to convert from Chapter 7 to 13	\$1500.00
Filing a motion to convert from Chapter 13 to 7 (+balance of Chapter 13 fees owed)	\$1500.00
Filing a motion for hardship discharge	\$600.00
Filing a motion to allow a late filing claim	\$500.00
Filing the certificate of debtor education	\$100.00
Filing a motion for voluntary dismissal	\$500.00
Filing or defending an adversary proceeding (no guarantee that we will file or defend adversary, decided on a case by case basis) (Retainer + \$250.00/hr)	\$TBD

ELEVEN: Client agrees that any breach of this Agreement will permit Attorney to withdraw.

Client consents to allowing Attorney to withdraw if the case is joint and the married couple separates at any time during the bankruptcy.

Client agrees that Client's file has been abandoned and the attorney/client relationship has ended if the Client does not respond to calls, emails, texts, or letters for 2 consecutive months. No fees will be returned.

If Client's case is not filed within 60 days of payment of the initial fee required to file (due to delay on Client's part or failure to provide documents), any fees paid will be forfeited and Attorney will no longer take phone calls from creditors, and will terminate representation. No refunds will be given. A new representation agreement will be required.

CLIENT WILL NOT PROVIDE ORIGINAL DOCUMENTS TO ATTORNEY, AND WILL ONLY PROVIDE COPIES. CLIENT CONSENTS TO ANY DOCUMENTS BEING DESTROYED BY ATTORNEY. CLIENT'S FILE MAY BE STORED ELECTRONICALLY.

CLIENT CONSENTS TO FILE BEING DESTROYED WITHIN ONE YEAR AFTER THE FILE IS CLOSED. FILE IS CLOSED EITHER UPON THE EARLIER- DISMISSAL, DISCHARGE, FUTILITY, OR NON-PAYOUT.

CLIENT WILL NOT PROVIDE CREDITORS WITH ATTORNEY'S MAIN PHONE NUMBER. FOR CLIENTS ON A PAYMENT PLAN, ATTORNEY WILL PROVIDE A SEPARATE PHONE NUMBER FOR CREDITOR CALLS. CREDITOR CALLS TO OUR MAIN OFFICE NUMBER WILL BE BILLED AT \$25 PER CALL.

CLIENT UNDERSTANDS THAT ATTORNEY CANNOT PREPARE/FILE THE CASE UNTIL CLIENT PROVIDES ALL REQUIRED INFORMATION AND PAYS REQUIRED FEES AFTER CLIENT SUBMITS ALL INFORMATION AND PAYS ALL REQUIRED FEES. IT MAY TAKE FROM 5 TO 10 BUSINESS DAYS OR MORE TO HAVE ALL DOCUMENTS READY TO FILE.

CLIENT UNDERSTANDS THAT THERE IS NO BANKRUPTCY PROTECTION FROM CREDITORS UNTIL THE CASE HAS ACTUALLY BEEN FILED. DURING THE TIME THAT THE CASE IS BEING PREPARED FOR FILING CREDITORS MAY REPOSSESS AND/OR FORECLOSE PROPERTY.

CLIENT AGREES THAT NO REFUNDS ARE GIVEN FOR ANY ATTORNEY FEES/COSTS.

ALL MINIMUM FEES REQUIRED TO FILE MUST BE PAID NO LATER THAN TEN (10) BUSINESS DAYS PRIOR TO ANY FORECLOSURE SALE OR PRIOR TO ANY REPOSSESSION OF PERSONAL PROPERTY OR ADDITIONAL RUSH FEES OF AT LEAST \$500 OR MORE WILL BE REQUIRED AT ATTORNEY'S SOLE DISCRETION.

I HAVE READ AND BEEN PROVIDED WITH A COPY OF THE ABOVE ATTORNEY REPRESENTATION AND FEES AGREEMENT AND UNDERSTAND ITS TERMS.

THERE ARE NO OTHER AGREEMENTS, ORAL OR OTHERWISE, BETWEEN CLIENT AND ATTORNEY, UNLESS REDUCED TO WRITING.

THIS REPRESENTATION AGREEMENT SHALL BE VOID IF NOT EXECUTED BY THE PARTIES WITHIN 6 MONTHS OF THE OFFER OF REPRESENTATION. A NEW ANALYSIS AND REPRESENTATION OFFER MUST BE MADE AFTER THIS REPRESENTATION AGREEMENT EXPIRES.

BY MY SIGNATURE BELOW, I AGREE TO BE BOUND BY ITS TERMS.

DATED 20 November, 2023

Keisha

CLIENT

ATTORNEY

Page | 7

STBD

Defending litigation files against client for allegations of fraud. Appeals from any Court decision, and handling any post-discharge/post-dismissal matters, and enforcing the automatic stay.(Retainer + \$250.00/hr.)

Extended negotiations by attorney on behalf of the client (or audit)	\$200.00/hr
Failure to keep any appointment with attorney unless client cancels 34 hours in advance	\$200.00
Showing up to the office without an appointment	\$150.00
Excessive phone calls, emails and/or letters to/from client	\$100.00
Any other extra work required that is not typical (out of court)	\$250.00/hr
Any other extra work required that is not typical (in court)	\$300.00/hr
Mortgage Modification through DMM/Portal	\$1700

THE ABOVE FEES HAVE BEEN EXPLAINED TO ME AND I HAVE RECEIVED A COPY OF THIS FEE SCHEDULE. I UNDERSTAND THAT THESE FEES ARE SUBJECT TO CHANGE, AND BY MY SIGNATURE I (WE) CONSENT TO THE FILING OF SUPPLEMENTAL CLAIMS IN THE PLAN TO PROVIDE FOR THESE FEES IF NOT PAID IN ADVANCE.

/s/

Client's Signature 

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

**United States Bankruptcy Court
District of South Carolina**

In re **Kelly Mae Hedman**

Debtor(s)

Case No.

Chapter

13

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

Master mailing list of creditors submitted via:

- (a) computer diskette
- (b) scannable hard copy
(number of sheets submitted)
- (c) electronic version filed via CM/ECF

Date: **January 11, 2024**

/s/ Kelly Mae Hedman

Kelly Mae Hedman

Signature of Debtor

/s/ Lauren Clark

Signature of Attorney

Lauren Clark

Law Office of Lauren Clark

925 D Wappoo Rd

Charleston, SC 29407

803-386-8868

Typed/Printed Name/Address/Telephone

10601 SC

District Court I.D. Number

AMAZON CORP
410 TERRY AVE N
SEATTLE WA 98109

AMEX
CORRESPONDENCE/BANKRUPTCY
PO BOX 981540
EL PASO TX 79998

AMEX
WORLD FINANCIAL CENTER
200 VESEY STREET
NEW YORK NY 10285

ATTORNEY GENERAL OF THE UNITED STATES
950 PENNSYLVANIA AVE NW
WASHINGTON DC 20530-0009

CAR CARE
1851 CRAIG PARK CT
SAINT LOUIS MO 63146-4122

CARE CREDIT
PO BOX 981438
EL PASO TX 79998-1438

CARECREDIT
PO BOX 960061
ORLANDO FL 32896

CHASE CARD SERVICES
ATTN: BANKRUPTCY
P.O. 15298
WILMINGTON DE 19850

CHASE CARD SERVICES
1111 POLARIS PARKWAY
COLUMBUS OH 43240

CITICORP
388 GREENWICH ST
NEW YORK NY 10013-2362

CITIZENS ONE
ATTN: BANKRUPTCY
ONE CITIZENS PLAZA
PROVIDENCE RI 02903

CITIZENS ONE FINANCING
1 CITIZENS PLZ Q
PROVIDENCE RI 02903

COMENITY/CARTER
ATTN: BANKRUPTCY
PO BOX 182125
COLUMBUS OH 43218

COMMENITY BANK
PO BOX 183003
COLUMBUS OH 43218-3003

CONTINENTAL FINANCE CO
ATTN: BANKRUPTCY
4550 LINDEN HILL RD, STE 4
WILMINGTON DE 19808

CONTINENTAL FINANCE COMPANY
4550 LINDEN HILL RD STE 400
WILMINGTON DE 19808-2952

CREDIT ONE BANK
ATTN: BANKRUPTCY DEPARTMENT
6801 CIMARRON RD
LAS VEGAS NV 89113

CREDIT ONE BANK
6801 S CIMARRON RD
LAS VEGAS NV 89113

CREDIT ONE BANK
PO BOX 98872
LAS VEGAS NV 89193-8872

DISCOVER FINANCIAL
ATTN: BANKRUPTCY
PO BOX 3025
NEW ALBANY OH 43054

DISCOVER FINANCIAL
P.O. BOX 6103
CAROL STREAM IL 60197-6103

EQUIFAX INFORMATION SERVICES LLC
P.O. BOX 740256
ATLANTA GA 30374

EXPERIAN
PO BOX 4500
ALLEN TX 75013

GAP
2 FOLSOM ST
SAN FRANCISCO CA 94105

GENESIS FS CARD SERVICES
ATTN: BANKRUPTCY
PO BOX 4477
BEAVERTON OR 97076

GENESIS FS CARD SERVICES
PO BOX 205458
DALLAS TX 75320

GOLDMAN SACHS BANK USA
ATTN: BANKRUPTCY
PO BOX 70379
PHILADELPHIA PA 19176

GOLDMAN SACHS BANK USA
200 WEST STREET
NEW YORK NY 10282-2102

HERITAGE TRUST FCU
200 MARYMEADE DR
POB 2941101
SUMMERTON SC 29483

HERITAGE TRUST FCU/REV FCU
ATTN: BANKRUPTCY
PO BOX 118000
CHARLESTON SC 29423

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA PA 19101-7346

JARDIN HEDMAN
104 NEW HOPE DR.
SUMMERTON SC 29486

JC PENNY
PO BOX 71719
PHILADELPHIA PA 19176

LOWES
1000 LOWE'S BOULEVARD
MOORESVILLE NC 28117

NAVY FCU
ATTN: BANKRUPTCY
PO BOX 3000
MERRIFIELD VA 22119

NAVY FCU
ATTN: BANKRUPTCY
PO BOX 3000
MERRIFIELD VA 22119

NAVY FCU
PO BOX 3000
MERRIFIELD VA 22119-3000

NETCREDIT
ATTN: BANKRUPTCY
175 W. JACKSON BLVD, STE 1000
CHICAGO IL 60604

NETCREDIT
175 W. JACKSON BLVD., SUITE 1000
CHICAGO IL 60604

NOTICE ONLY RECIPIENTS

OLD NAVY
2 FOLSOM ST
SAN FRANCISCO CA 94105

ONE MAIN FINANCIAL
PO BOX 1010
EVANSVILLE IN 47706

ONEMAIN
5221 GEARY BLVD
SAN FRANCISCO CA 94118-2817

PAYPAL CREDIT
P.O. BOX 105658
ATLANTA GA 30348-5658

REPUBLIC FINANCE
ATTN: BANKRUPTCY
7031 COMMERCE CIRCLE
BATON ROUGE LA 70809

REPUBLIC FINANCE CORP
7031 COMMERCE CIR
BATON ROUGE LA 70809

REV FCU
200 MARYMEADE DR
SUMMERVILLE SC 29483-5243

SAMS CLUB
2101 SE SIMPLE SAVINGS DR
BENTONVILLE AR 72716-0745

SC DEPT. OF REVENUE
PO BOX 125
COLUMBIA SC 29214

SYCHRONY BANK
950 FORRER BLVD
DAYTON OH 45420-1469

SYNCB/OLD NAVY
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCB/VENMO
ATTN: BANKRUPTCY
P.O. BOX 965064
ORLANDO FL 32896

SYNCHRONY BANK
950 FORRER BLVD
DAYTON OH 45420-1469

SYNCHRONY BANK / PAYPAL
140 WEKIVA SPRINGS ROAD
LONGWOOD FL 32779

SYNCHRONY BANK/AMAZON
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY BANK/CARE CREDIT
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY BANK/GAP
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY BANK/JCPENNEY
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY BANK/LOWES
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY BANK/SAMS
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

SYNCHRONY/CAR CARE
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO FL 32896

TARGET NB
C/O FINANCIAL & RETAIL SERVICES
MAILSTOP BT PO BOX 9475
MINNEAPOLIS MN 55440

TARGET RED CARD
POB 30171
TAMPA FL 33630

TRAC/CBCD/CITICORP
CITICORP CR SRVS/CENTRALIZED BANKRUPTCY
PO BOX 790040
ST LOUIS MO 63179

TRANSUNION
CONSUMER DISPUTE CENTER
PO BOX 2000
CRUM LYNNE PA 19022

UNITED STATES ATTORNEY OFFICE
ATTN: DOUG BARNETT
1441 MAIN ST
COLUMBIA SC 29201

UPGRADE, INC.
ATTN: BANKRUPTCY
275 BATTERY STREET 23RD FLOOR
SAN FRANCISCO CA 94111

UPGRADE, INC.
275 BATTERY ST FL 23
SAN FRANCISCO CA 94111-3305

USAA FEDERAL SAVINGS BANK
ATTN: BANKRUPTCY
9800 FREDERICKSBURG ROAD
SAN ANTONIO TX 78288

USAA FEDERAL SAVINGS BANK
10750 MCDERMOTT FRY
SAN ANTONIO TX 78288

VENMO
2211 N 1ST ST
SAN JOSE CA 95131-2021